

# **External Evaluation of the Indian Health Service California Area Injury Prevention Program: Evaluation Report – Executive Summary**

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## California Area Evaluation Report – Executive Summary

This Executive Summary outlines the major findings outlined in the California Area Injury Prevention Program (IPP) Evaluation Report completed in October 2001 by Carolyn E. Crump, PhD and Robert J. Letourneau, MPH of the University of North Carolina. Included in this summary are the Program Stage of Development ratings for the 12 Evaluation Components used to guide the evaluation process:

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|--------------------------------------|---|
| 1. Mission/Vision                    | 7. Needs Assessment/Defined Service Population    |
| 2. Resource Allocation/Accounting    | 8. Surveillance Data Collection                   |
| 3. Management Support                | 9. Injury Program Planning and Implementation     |
| 4. Staffing/Roles & Responsibilities | 10. Marketing/Advocacy                            |
| 5. Training                          | 11. Evaluation/Reporting                          |
| 6. Partnerships/Collaboration        | 12. Technical Assistance/Building Tribal Capacity |

A brief summary of recommendations is also provided in this Executive Summary for each Evaluation Component. Please refer to the full-text version of the California Area Evaluation Report for the following: a) background on the development of the evaluation process; b) summary of the California Area Evaluation Process; c) an overview of the California Area IPP; d) a description of the Program Stage of Development Process; e) contextual factors used to determine stage of development ratings; f) recommendations; and f) a list of resources for California Area IPP staff.

### 1. Mission/Vision

<b>Basic</b>	Intermediate	Comprehensive
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The California Area Injury Prevention Program (IPP) is at the **Basic** stage of development for Mission/Vision. The evaluators recommend that the California Area Injury Prevention Program develop a more systematic way of program planning. This planning should be conducted annually or bi-annually at a minimum and should include the identification of goals, objectives, and activities for the injury prevention program at the Area, District, and Tribal level. The contents of the plan should be based on available local data and direct feedback from District and Tribal Program personnel involved with the injury prevention program. As part of this approach, California Area staff should consider developing plans that are based upon the 12 Evaluation Components used for this Area Evaluation. For example, Evaluation Components rated as “basic” could be the priority for the short-term (next 1-2 years) or long-term (next 3-5 years). Having a program plan may facilitate greater understanding and/or appreciation among Tribal Program Directors for the types of injury prevention activities that should be conducted at the Area-level that could also be developed at the Tribal Health Program-level. Continuing the practice of providing presentations about the Area Injury Prevention Program at the Tribal Leader’s Meeting is also a strategic way to educate leaders about the California Area Injury Prevention Program.

### 2. Resource Allocation/Accounting

<b>Basic</b>	Intermediate	Comprehensive
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The California Area IPP is at the **Basic** stage for Resource Allocation/Accounting. The evaluators were provided with limited information about the funds supporting the California Area Injury Prevention Program. It is not clear to the evaluators whether the California Area receives an equitable share of funds to support IP from IHS National and/or if the California Area Division of Environmental Health Services allocates all available funds to support the injury prevention efforts. What does appear appropriate, given the large population and geographic spread of the population, is that the Area would benefit from having funds to support a full-time Area Injury Prevention Specialist (increased from 50 percent) and one part-

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time District Injury Prevention Specialist. The evaluators recommend that the California Area allow Robert Newsad to work full-time as the Area Injury Prevention Specialist. In addition, the injury prevention program is meant to support prevention activities and therefore the California Area may be at a disadvantage in funding for IP since the IP RRM calculation includes the “user” population rather than service or census population figures. As a result, additional funds to support special projects may also be warranted to fully support injury prevention activities in the California Area. The limited degree to which Tribes in the California Area have been awarded grant funding from the IHS Tribal Injury Prevention Grants Program indicates that Tribal capacity building needs to receive greater emphasis from the California Area Injury Prevention Program. With the advent of funding for Tribal injury prevention activities coming from IHS national and other external sources, California Area and District staff responsible for conducting injury prevention need to be prepared to provide effective and useful technical assistance to Tribes (e.g., intervention planning/implementation, grantwriting). In addition, the evaluators encourage the Area IP Specialist to continue to pursue external sources of funding to support injury prevention activities within the Area, particularly Area-wide activities.

### 3. Management Support

Basic	Intermediate	Comprehensive
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The California Area IPP is at the **Basic** stage of development for Management Support. Success of injury prevention programs often depends on the support provided to the program from upper management staff at the Area Office and/or Tribal government. While some support for the California Area Injury Prevention program appears to exist among Area Office staff and Tribal Leaders/Health Program Directors, management support could be enhanced if support is identified for additional staff positions for injury prevention (e.g., full-time Area IP Specialist, at least part-time District Injury Prevention Specialist). In addition, the evaluators suggest that additional exposure and discussion regarding the California Area Injury Prevention Program activities be facilitated to educate Tribal Leaders about the importance of injury prevention. The evaluators also suggest that additional direction and guidance be provided from Area Office staff to field staff regarding the prioritizing of injury prevention activities with other identified needs of the Tribal Health Programs they serve. Management support from the California Area Office could also be improved in the form of a formal rewards/recognition process/ceremony to recognize the exemplary accomplishments of District or Tribal Program staff for injury prevention activities and accomplishments.

### 4. Staffing/Roles and Responsibilities

Basic	Intermediate	Comprehensive
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The California Area IPP is at the **Basic** stage of development for Staffing/Roles and Responsibilities. The California Area is in need of additional staffing to support Area-wide injury prevention activities. The Area Injury Prevention Specialist should be allowed to spend 100 percent time on injury prevention. Given the large population and geographic spread of the population. The Area would also benefit from having funds to support an additional part-time District Injury Prevention Specialist. The evaluators believe that district environmental health staff position descriptions should be revised so that they explicitly state injury prevention roles and responsibilities. Staff development could be enhanced through the understanding and use of communication principles described by the Myers Briggs Type Indicator (MBTI) and Neurolinguistic Programming (NLP). All California Area IP staff are encouraged to review techniques and principles for communicating effectively with those who have different communication preferences.

## 5. Training

Basic	<b>Intermediate</b>	Comprehensive
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The California Area IPP is at the **Intermediate** stage of development for Training. Funding barriers appear to limit the support available for training opportunities within and outside the Area. The evaluators recommend that the Area IP Specialist conduct a more formal assessment of training needs among California Area Tribal Program staff (e.g., a survey) to assess training needs. As more Tribes receive IHS Tribal Injury Prevention Grants Program funding, the need for additional training may increase, for example: program management; program implementation; identifying resources; writing grants; and program sustainability. IHS staff should be cognizant of meeting these training needs as they emerge. Should future Level I training courses be developed to address training needs within the California Area, the evaluators encourage course instructors to review materials related to adult learning principles and practices. The evaluators also recommend that Area and District IP staff conduct follow-up calls or visits regarding training opportunities, as relying primarily on mailed announcements of training may not be enough to encourage potential workshop participants to register. Follow-up with course participants (Area-specific and national courses) should also be conducted on a more regular basis in the California Area. The California Area should consider developing a training program database to document who has taken training courses and track their involvement in injury prevention activities following attendance at courses. The California Area has not nominated or supported as many Fellowship Program participants as other IHS Areas. As more Fellowship participants represent the California Area in the future, it will be important to ensure adequate mentoring and assistance to those who participate in the Fellowship.

## 6. Partnerships/Collaboration

<b>Basic</b>	Intermediate	Comprehensive
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The California Area IPP is at the **Basic** stage of development for Partnerships/Collaboration. From the information collected through the evaluation process, it appears that there has not been an emphasis on the professional partnerships and collaborations in the California Area. The evaluators suggest that California Area and District staff build on their existing relationships and expand them in ways that lead to the implementation of IP projects. Having a set of specific ideas and project proposals, perhaps outlined in the annual California Area injury prevention program plan, will assist California Area and District staff by focusing their attention on collaborations leading to the joint implementation of specific injury prevention interventions. To the extent possible, California Area staff should consider ways of increasing membership and involvement on local injury prevention coalitions. Having an Area strategic plan, including specific plans for the development of local coalitions, can provide focus and direction to local IP efforts. In addition, the evaluators suggest that a California Area IP Steering committee be developed with representatives from active Tribal Health Programs in all three Districts in the Area.

## 7. Needs Assessment/Defined Service Population

<b>Basic</b>	Intermediate	Comprehensive
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The California Area IPP is at the **Basic** stage of development for Needs Assessment/Defined Service Population. In previous Area evaluations, the evaluators have learned that the Indian Health Service does not support any specific model for conducting needs assessments. Needs assessment data, combined with injury surveillance data, can serve as the foundation from which injury prevention projects and activities are developed, implemented, and evaluated. California Area injury prevention staff should consider

developing more formal procedures to collect needs assessment data. This information should be routinely collected as part of a structured way of developing tailored, local-level injury prevention programs in direct response to community member requests. Collection of needs should be conducted with and by District staff as well as with community members (e.g., via local community injury prevention coalitions or as part of a planned needs assessment data collection activity/project). To assist with identifying California Area injury prevention needs (training, funding, programs, etc.), a California Area Tribal Injury Prevention Program Steering Committee should also be formed. In addition, the evaluators suggest that California Area staff consider supporting one or more Photovoice projects. Photovoice is a methodology to reach, inform, and organize community members, enabling them to prioritize their concerns and discuss problems and solutions. This “needs assessment” method also promotes critical dialogue and knowledge about personal and community issues through large and small group discussions of photographs and therefore has the potential to reach policy makers. In addition to identifying community members’ perceived injury prevention needs and interests, a community capacity assessment could be completed (see resources by John Kretzman and John McKnight).

### 8. Surveillance Data Collection

Basic	Intermediate	Comprehensive
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The California Area IPP is at the **Basic** stage of development for Surveillance Data Collection. Data collection in the California Area is currently limited. A more comprehensive data collection system, with a focus on the collection of severe injuries is recommended. Given the computer and injury content expertise of Area IP Specialist Robert Newsad, the development of a comprehensive severe injury surveillance system in the California Area should be pursued. Due to the barriers of collecting Tribal specific mortality and morbidity data, the Area IP Specialist is encouraged to consider alternative sources of data that may be used to identify local injury issues (e.g., highway patrol, EMS). The collection of contract health care data related to injury prevention should also be investigated. The evaluators suggest that Robert Newsad conduct an assessment of the usefulness of the severe injury atlas created and distributed in October 2000. It was not clear to the evaluators how this report was being used by Tribal injury prevention practitioners or the extent to which its’ usefulness had been assessed. In addition, Robert is encouraged to summarize the report findings for the major Tribes in each District. Robert Newsad has obtained a standardized set of methods for conducting observational surveys from the National Highway Traffic Safety Administration. The evaluators suggest that he use this and/or other resources to identify a set of observational seat survey standards/protocols that could be used in the California Area. These standards/protocols could be distributed, with appropriate training, to all Tribal Program injury prevention practitioners in the California Area, with guidelines for submitting observational data to the California Area Office for reporting purposes.

### 9. Injury Program Planning and Implementation

Basic	Intermediate	Comprehensive
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The California Area IPP is at the **Basic** stage of development for Injury Program Planning and Implementation. To increase the effectiveness of the California Area Injury Prevention Program activities, the evaluators encourage the staff to support a greater percentage of multiple level interventions (e.g., individual, vehicle/vector, and environmental change) and should use multiple methods (e.g., health education, engineering, policy development, and enforcement). The evaluators recognize that distributing safety devices (e.g., carseats, smoke detectors, bike helmets) allows for a concrete and straight-forward approach at distributing funds in a far and equitable way to Tribal Programs in the California Area.

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However, most other IHS Area Injury Prevention Programs distribute funds through competitive small-grant programs. Staff in the California Area should consider adding a small grant program to their Area Injury Prevention activities. Supporting an Area grant program could provide incentive to Tribal injury prevention programs to expand their activities to provide a multi-level approach (e.g., enforcement, education, environmental change). The evaluators realize the challenges that all IHS Areas have faced in addressing the problems of intentional injuries (assault, domestic violence, suicide). It seems an appropriate issue to address through collaborative relationships with IHS Area Departments and other organizations with responsibility for alcohol abuse prevention/treatment and mental health. While perspectives may vary in terms of a clinical versus a public health approach, there are benefits to working together to prevent both intentional and unintentional injuries among American Indians in California.

### 10. Marketing/Advocacy

Basic	Intermediate	Comprehensive
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The California Area IPP is at the **Basic** stage of development for Marketing. While some injury prevention marketing activities have been developed in the California Area, additional activities could be developed, such as a California Area Fact Sheet. The marketing materials should be updated regularly to correspond to major program emphasis areas of the program. All materials developed to market the Area's program should be updated and distributed annually (or bi-annually) to the Area's list of California Area injury prevention practitioners or partners. The distribution of such marketing materials could coincide with materials distributed as part of the program planning process, to highlight activities completed in the previous year or years. The evaluators learned that even though the Area Injury Prevention Specialist has provided the California Area Injury Prevention Annual Report to the California Area Instructional Technology Department, the report has not been made available on the California Area website. With the impending dependence and implications of the impact of the Internet, the evaluators encourage the California Area to enhance its use of the Internet to market the injury prevention program. The formation of an Area-specific Injury Prevention Program webpage for the California Area Injury Prevention Program would also be beneficial. This could also become part of or linked to the IHS national Injury Prevention Program website. To avoid duplication of effort, California Area staff should consider including materials on the Website that have already been created to promote the program through other channels (e.g., annual reports, fact sheets).

### 11. Evaluation/Reporting

Basic	Intermediate	Comprehensive
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The California Area IPP is at the **Basic** stage of Development for Evaluation/Reporting. For the California Area Injury Prevention Program to advance to the next stage of development for this Evaluation Component, more formal evaluation and reporting mechanisms should be put in place to monitor the primary injury prevention projects implemented by Tribal Health Programs in the California Area. Evaluation of the device distribution programs in the California Area is limited and the evaluators encourage Area staff to conduct more formal evaluations of the device distribution campaigns. The evaluators are unable to completely assess the effectiveness and/or usefulness of the current monthly reporting system. However, documenting activities and reporting accomplishments as well as challenges is very important from a management perspective. Improving the usefulness of the current reporting system in the California Area is something that Area management staff should address to increase their ability to reflect on their Program's progress. Tribal Injury Prevention Practitioners could be encouraged to report on their activities once a year. This report of activities could be completed through brief survey or phone

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interview from the Area IP Specialist. With increased ability to summarize activities and reflect on projects conducted at Tribal Programs in the California Area, the ability to plan for the future will be more effective. Finally, the evaluators have learned that evaluation skills have not been adequately addressed in the IHS national training courses provided to date. As a result, the evaluators suggest that the California Area consider redesigning future Level I courses to include skill building for evaluation of community injury prevention programs or projects. Program evaluation may also be a ‘specialized’ training course that could be developed by the Area IP Specialist for Tribal injury prevention practitioners.

### 12. Technical Assistance/Building Tribal Capacity

Basic	Intermediate	Comprehensive
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The California Area IPP is between the **Basic** and **Intermediate** stage of development for Technical Assistance/Building Tribal Capacity. While very few local injury prevention coalitions have been formed in the California Area, training of Tribal staff has been somewhat limited, and the current emphasis on local injury prevention projects is limited primarily to device distribution campaigns, the California Area Injury Prevention Program has worked to build the capacity of Tribes to conduct their own injury prevention programs. With the advent of the IHS Tribal Injury Prevention Grants Program funding to Tribes, it is important for California Area and District IP staff to provide technical assistance to all Tribal Organizations in the California Area interested in working to prevent injuries and/or to submit proposals for additional grant or project funding. To increase the effectiveness of developed injury prevention activities, IHS staff should also assist Tribal staff and local coalitions with strategic planning, evaluation, and reporting. Establishing a California Area Tribal Injury Prevention Advisory Committee may also raise awareness of the importance of injury prevention in the California. A Tribal IP Advisory Committee could be encouraged to develop a relationship with State and Regional programs that address specific issues important to the safety of Tribal members (e.g., domestic violence, crime prevention).

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In summary, the California Area Injury Prevention Program is at the following Stages of Development for the 12 Evaluation Components used to guide the Evaluation:

Evaluation Component	Stage of Development		
	Basic	Intermediate	Comprehensive
1. Mission/Vision	Basic	Intermediate	Comprehensive
2. Resource Allocation/Accounting	Basic	Intermediate	Comprehensive
3. Management Support	Basic	Intermediate	Comprehensive
4. Staffing/Roles and Responsibilities	Basic	Intermediate	Comprehensive
5. Training	Basic	Intermediate	Comprehensive
6. Partnerships/Collaboration	Basic	Intermediate	Comprehensive
7. Needs Assessment/Defined Service Population	Basic	Intermediate	Comprehensive
8. Surveillance Data Collection	Basic	Intermediate	Comprehensive
9. Injury Program Planning and Implementation	Basic	Intermediate	Comprehensive
10. Marketing/Advocacy	Basic	Intermediate	Comprehensive
11. Evaluation/Reporting	Basic	Intermediate	Comprehensive
12. Technical Assistance/Building Tribal Capacity	Basic	Intermediate	Comprehensive

California Area Injury Prevention Program staff should use the results, recommendations, and resources provided in this report to develop an Action Plan to enhance the stages of development for each Evaluation Component used in this assessment process.